

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO

IN RE	*	BKRTCY. NO. 19-02673 BKT
CRUZ MIRANDA, CARLOS ALBERTO	*	CHAPTER 13
xxx-xx-4952	*	
DEBTOR		

**DEBTOR'S NOTICE OF FILING OF *AMENDED SCHEDULE "I"*
OFFICIAL FORM 106I**

TO THE HONORABLE COURT:

COMES NOW, CARLOS ALBERTO CRUZ MIRANDA, the Debtor in the above captioned case, through the undersigned attorney, and very respectfully states and prays as follows:

1.The Debtor is hereby submitting *Amended Schedule "I"*, dated July 12, 2019, herewith and attached to this motion.

2.The Schedule "I" is amended to inform the Debtor's actual income and to clarify the purpose of each employer salary deduction from his paycheck, pursuant to a *Trustee's Objection to Confirmation*, Docket No. 10, in the above captioned case.

NOTICE PURSUANT TO LOCAL BANKRUPTCY RULE 1009(b)

Within thirty (30) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

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Notice of Amended Schedule "I"
Case no. 19-02673 BKT13

CERTIFICATE OF SERVICE

I CERTIFY, that on this same date a copy of this Notice was filed with the Clerk of the Court using the CM/ECF system which will send notice of same to the Chapter 13 Trustee, the US Trustee's Office, and to all CM/ECF participants; I also certify that a copy of this notice was sent via regular US mail to the Debtor and to all creditors and interested parties appearing in the master address list (CM/ECF non-participants), hereby attached.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 12th day of July, 2019.

/s/Roberto Figueroa Carrasquillo
USDC #203614
RFIGUEROA CARRASQUILLO LAW OFFICE PSC
ATTORNEY FOR the DEBTOR
PO BOX 186 CAGUAS PR 00726
TEL NO 787-744-7699 FAX 787-746-5294
Email: rfigueroa@rfclawpr.com

Fill in this information to identify your case:

Debtor 1 CARLOS ALBERTO CRUZ MIRANDA

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN DIVISION

Case number 3:19-bk-2673
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

Debtor 1

- ☒ Employed
- ☐ Not employed

Mental health technician

FHC Panamericano

State Road 787 Km 1.5
Cidra, PR 00739

Debtor 2 or non-filing spouse

- ☐ Employed
- ☐ Not employed

How long employed there? 12 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>3,288.10</u>	\$ <u>N/A</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>N/A</u>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>3,288.10</u>	\$ <u>N/A</u>

Debtor 1 **CRUZ MIRANDA, CARLOS ALBERTO**

Case number (if known) **3:19-bk-2673**

	For Debtor 1	For Debtor 2 or non-filing spouse
4. Copy line 4 here	\$ 3,288.10	\$ N/A
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	\$ 0.00	\$ N/A
5b. Mandatory contributions for retirement plans	\$ 0.00	\$ N/A
5c. Voluntary contributions for retirement plans	\$ 0.00	\$ N/A
5d. Required repayments of retirement fund loans	\$ 0.00	\$ N/A
5e. Insurance	\$ 0.00	\$ N/A
5f. Domestic support obligations	\$ 0.00	\$ N/A
5g. Union dues	\$ 0.00	\$ N/A
5h. Other deductions. Specify: <u>MCEE (Medicare)</u>	\$ 47.68	\$ N/A
<u>PR Sit (State Tax Retention)</u>	\$ 128.62	\$ N/A
<u>TSSE (Social Security)</u>	\$ 203.86	\$ N/A
<u>PR/MED (Health Insurance)</u>	\$ 60.76	\$ N/A
<u>GARN (Garnishment)</u>	\$ 0.00	\$ N/A
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	\$ 440.92	\$ N/A
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	\$ 2,847.18	\$ N/A
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$ 0.00	\$ N/A
8b. Interest and dividends	\$ 0.00	\$ N/A
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$ 0.00	\$ N/A
8d. Unemployment compensation	\$ 0.00	\$ N/A
8e. Social Security	\$ 0.00	\$ N/A
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	\$ 0.00	\$ N/A
8g. Pension or retirement income	\$ 0.00	\$ N/A
8h. Other monthly income. Specify:	\$ 0.00	\$ N/A
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	\$ 0.00	\$ N/A
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$ 2,847.18 + \$ N/A	\$ 2,847.18
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:		
	11. +\$	0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$	2,847.18
		Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:			
Debtor 1	<u>CARLOS ALBERTO CRUZ MIRANDA</u>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>DISTRICT OF PUERTO RICO, SAN JUAN DIVISION</u>		
Case number (if known)	<u>3:19-bk-2673</u>		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

x

Carlos A. Cruz Miranda
CARLOS ALBERTO CRUZ MIRANDA
Signature of Debtor 1

x

Signature of Debtor 2

Date July 12, 2019

Date _____

Label Matrix for local noticing
104-3
Case 19-02673-BKT13
District of Puerto Rico
San Juan
Fri Jul 12 09:10:27 AST 2019

SUME
PO Box 11218
San Juan, PR 00910-2318

Apartamento de Hacienda
Bankruptcy Section
35 Ave Arterial Hostos Ste 1504
San Juan, PR 00918-1451

Midland Funding LLC
P.O. Box 2011
Warren, MI 48090-2011

DONSA LECAROS ARRIBAS
OFFICE OF THE US TRUSTEE (UST)
CHOA BUILDING
10 TANCA STREET SUITE 301
SAN JUAN, PR 00901

AMERICAS LEADING FINANCE LLC
BELLVER ESPINOSA LAW FIRM
COND EL CENTRO I SUITE 801
500 MUNOZ RIVERA AVE
SAN JUAN, PR 00918-3300

Americas Leading Finance LLC
PO Box 192367
San Juan, PR 00919-2367

Lcdo Miguel A Maza, Esq
PO Box 364028
San Juan, PR 00936-4028

ALEJANDRO OLIVERAS RIVERA
ALEJANDRO OLIVERAS CHAPTER 13 TRUS
PO BOX 9024062
SAN JUAN, PR 00902-4062

ROBERTO FIGUEROA CARRASQUILLO
PO BOX 186
CAGUAS, PR 00726-0186

US Bankruptcy Court District of P.R.
Jose V Toledo Fed Bldg & US Courthouse
300 Recinto Sur Street, Room 109
San Juan, PR 00901-1964

Autoridad Acueductos Y Alcantarillados
PO Box 5729
Caguas, PR 00726-5729

Midland Credit Management Puerto Rico LL
c/o Fast Solutions LLC
Citi Tower 252 PonceLeon Ave 20Fl
San Juan, PR 00918

CARLOS ALBERTO CRUZ MIRANDA
URB CAGUAS NORTE
K5 JERUSALEM ST
CAGUAS, PR 00725-2227

End of Label Matrix
Mailable recipients 13
Bypassed recipients 0
Total 13